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| Fill in this information to identify your case: | | |
|---|-------------------------------|------------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVISION | _ | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | |
|-----|---|--|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued | Nylas First name | First name |
| | picture identification (for example, your driver's | Thethano | T HOL MAINE |
| | license or passport). | Middle name | Middle name |
| | Bring your picture | Foster, III | |
| | identification to your meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have | | |
| | used in the last 8 years | | |
| | Include your married or maiden names and any | | |
| | assumed, trade names and | | |
| | doing business as names. | | |
| | Do NOT list the name of any separate legal entity | | |
| | such as a corporation, | | |
| | partnership, or LLC that is not filing this petition. | | |
| 3. | Only the last 4 digits of | | |
| | your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-2205 | |
| | | | |

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Debtor 1 Nylas Foster, III Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
|---|---------------------------|---|--|--|--|
| 4. Your Employer Identification Number (EIN), if any. | | | | | |
| | | EIN | EIN | | |
| 5. | Where you live | | If Debtor 2 lives at a different address: | | |
| | | 931 Greenleaf Road Conyers, GA 30013 | | | |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | |
| | | Newton County | County | | |
| | | • | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | |
| 6. | Why you are choosing | Check one: | Check one: | | |
| ٠. | this district to file for | _ | | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | |
| | | | | | |
| | | | | | |

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Debtor 1 Nylas Foster, III Case number (if known)

| ar | Tell the Court About | Your E | 3ankruptcy Ca | ase | | | | |
|-----|---|---|--|---|---|---|-----------|--|
| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | |
| | choosing to file under | | Chapter 7 | | | | | |
| | | | Chapter 11 | | | | | |
| | | | Chapter 12 | | | | | |
| | | | Chapter 13 | | | | | |
| 3. | How you will pay the fee | • | about how yo | ou may pay. Typ attorney is subr | ically, if you are paying the fee yo | with the clerk's office in your local court for more urself, you may pay with cash, cashier's check, or llf, your attorney may pay with a credit card or che | money | |
| | | | | | allments. If you choose this options (Official Form 103A). | n, sign and attach the Application for Individuals t | o Pay | |
| | | | I request that but is not req applies to you | at my fee be wa uired to, waive y ur family size an | ived (You may request this option your fee, and may do so only if your d you are unable to pay the fee in | only if you are filing for Chapter 7. By law, a judg ur income is less than 150% of the official poverty installments). If you choose this option, you must ial Form 103B) and file it with your petition. | line that | |
|). | Have you filed for bankruptcy within the | ■ N | 0. | | | | | |
| | last 8 years? | □ Y | es. | | | | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| 10. | Are any bankruptcy cases pending or being | ■ N | 0 | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | □ Y | es. | | | | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| 11. | Do you rent your residence? | ■ N | o. Go to I | ine 12. | | | | |
| | residence: | ΠY | es. Has yo | our landlord obta | nined an eviction judgment agains | you? | | |
| | | | | No. Go to line | 12. | | | |
| | | | | Yes. Fill out <i>Ini</i> this bankruptcy | | ludgment Against You (Form 101A) and file it as p | art of | |
| | | | | | | | | |

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Debtor 1 Nylas Foster, III Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to Chapter 11 of the proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or Bankruptcy Code, and you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, are you a small business cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. debtor or a debtor as § 1116(1)(B). defined by 11 U.S. C. § I am not filing under Chapter 11. No. 1182(1)? For a definition of small I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. business debtor, see 11 U.S.C. § 101(51D). ☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I ☐ Yes. choose to proceed under Subchapter V of Chapter 11. Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs? Number, Street, City, State & Zip Code

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Debtor 1 Nylas Foster, III Case number (if known)

15. Tell the court whether

Part 5:

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Der | inyias roster, iii | | | | | |
|---|--|-----------------------|--|--|---|--|
| Par | t 6: Answer These Quest | ions for R | eporting Purposes | | | |
| 16. | What kind of debts do you have? 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred individual primarily for a personal, family, or household purpose." | | | | | |
| | | | ☐ No. Go to line 16b. | | | |
| | | 4.01 | Yes. Go to line 17. | turing a debte 0. Deciment debte and debte | that was to assess the above | |
| | | 16b. | | business debts? Business debts are debts vestment or through the operation of the bus | | |
| | | | ☐ No. Go to line 16c. | | | |
| | | | ☐ Yes. Go to line 17. | | | |
| | | 16c. | State the type of debts you | owe that are not consumer debts or busines | ss debts | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapte | er 7. Go to line 18. | | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | | . Do you estimate that after any exempt propavailable to distribute to unsecured creditors' | perty is excluded and administrative expenses ? | |
| | administrative expenses | | ■ No | | | |
| | are paid that funds will be available for distribution to unsecured creditors? | | ☐ Yes | | | |
| 18. | How many Creditors do | ■ 1-49 | | ☐ 1,000-5,000 | ☐ 25,001-50,000 | |
| | you estimate that you owe? | □ 50-99 | | ☐ 5001-10,000 | ☐ 50,001-100,000 | |
| | | □ 100-1 | | □ 10,001-25,000 | ☐ More than100,000 | |
| | | 200-9 | 99 | | | |
| 19. | How much do you | \$0 - \$ | 50,000 | ☐ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion | |
| | estimate your assets to be worth? | | 01 - \$100,000 | ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million | ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion | |
| | | | 001 - \$500,000 001 - \$1 million | □ \$100,000,001 - \$100 million | ☐ More than \$50 billion | |
| 20. | How much do you | □ \$0 - \$ | 50,000 | ☐ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion | |
| | estimate your liabilities to be? | □ \$50,0 | 001 - \$100,000 | □ \$10,000,001 - \$50 million | \$1,000,000,001 - \$10 billion | |
| | | | 001 - \$500,000 | □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion | |
| | | □ \$500, | 001 - \$1 million | — \$100,000,001 \$200 Hillion | I wore than \$50 billion | |
| Par | t7: Sign Below | | | | | |
| For | you | I have ex | camined this petition, and I de | eclare under penalty of perjury that the inform | mation provided is true and correct. | |
| | | If I have United S | chosen to file under Chapter tates Code. I understand the | 7, I am aware that I may proceed, if eligible, relief available under each chapter, and I ch | , under Chapter 7, 11,12, or 13 of title 11, noose to proceed under Chapter 7. | |
| If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | | ot an attorney to help me fill out this | |
| | | I request | relief in accordance with the | e chapter of title 11, United States Code, spe | cified in this petition. | |
| | | bankrupt and 357 | cy case can result in fines up | nt, concealing property, or obtaining money on to \$250,000, or imprisonment for up to 20 y | or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519, | |
| | | Nylas F | s Foster, III foster, III e of Debtor 1 | Signature of Debto | or 2 | |
| | | Executed | d on February 28, 2023 | Executed on | | |
| | | | MM / DD / YYYY | | I / DD / YYYY | |

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Debtor 1 Nylas Foster, III Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ lesha W | Varmack, GA Bar No. | Date | February 28, 2023 | |
|--------------------------|-------------------------|---------------|-------------------|--|
| Signature of | Attorney for Debtor | | MM / DD / YYYY | |
| lesha War | mack, GA Bar No. 865980 | | | |
| | ashington, P.C. | | | |
| Firm name | | | | |
| 3300 North Building 3 | neast Expressway | | | |
| Atlanta, G. | A 30341 | | | |
| Number, Street, | City, State & ZIP Code | | | |
| Contact phone | 770-488-9338 | Email address | cworders@cw13.com | |
| GA | | | | |
| Bar number & St | tate | | | |

| Fill in | this inforn | nation to identify you | r case: | | | |
|------------------|---|---|--|--|--|---|
| Debto | r 1 | Nylas Foster, III | | | | |
| | | First Name | Middle Name | Last Name | | |
| Debto (Spouse | r 2 e if, filing) | First Name | Middle Name | Last Name | | |
| | | akruptov Court for the | NODTHEDNI DISTRICT | OF GEORGIA - ATLANTA DI | VISION | |
| United | J States Dai | nkruptcy Court for the: | NORTHERN DISTRICT | OF GEORGIA - ATLANTA DI | VISION | |
| Case (if know | number _ n) | | | | _ | Check if this is an amended filing |
| | | rm 107 of Financial | Affairs for Indivi | duals Filing for B | ankruptcy | 04/2 |
| nform numbe | ation. If mer (if know) | ore space is needed, n). Answer every ques | attach a separate sheet to stion. | this form. On the top of an | equally responsible for sup y additional pages, write you | |
| Part 1 | | | erital Status and Where You | u Lived Before | | |
| 1. VV | rnat is you | current marital statu | IS ? | | | |
| | MarriedNot mar | ried | | | | |
| 2. D | uring the la | ast 3 years, have you | lived anywhere other than | where you live now? | | |
| | No Yes. Lis | t all of the places you l | ived in the last 3 years. Do n | not include where you live now | <i>i</i> . | |
| | Debtor 1: | | Dates Debtor 1 lived there | Debtor 2 Prior Ac | dress: | Dates Debtor 2 lived there |
| | | | | | ity property state or territor ico, Texas, Washington and V | |
| | No Yes. Ma | ke sure you fill out <i>Scl</i> | nedule H: Your Codebtors (C | Official Form 106H). | | |
| Part 2 | Explai | n the Sources of You | r Income | | | |
| Fi | ill in the tota | l amount of income yo | u received from all jobs and | ng a business during this yeall businesses, including partive together, list it only once ur | | ndar years? |
| | | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$344.60 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

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Debtor 1 Nylas Foster, III Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions (before deductions and Check all that apply. exclusions) and exclusions) For last calendar year: \$42,563.74 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2022) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$47,000.00 Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2021) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. Debtor 2 Debtor 1 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7 ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Total amount

paid

Amount vou

still owe

Was this payment for ...

Dates of payment

Creditor's Name and Address

| | Case 23-51911-jwc Doc | | | 2/28/23 12:5 | 3:24 De | esc Main |
|-----|---|---|--|---|-------------------------------|--|
| De | ebtor 1 Nylas Foster, III | Document | Page 10 of 54 | se number (<i>if known</i>) | | |
| | <u>.</u> | | | | | |
| 7. | Within 1 year before you filed for bankrup <i>Insiders</i> include your relatives; any general p of which you are an officer, director, person is a business you operate as a sole proprietor. alimony. | artners; relatives of any ge n control, or owner of 20% | neral partners; partners or more of their voting | erships of which yog g securities; and a | ou are a genei ny managing | ral partner; corporations agent, including one fo |
| | ■ No□ Yes. List all payments to an insider. | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason fo | r this payment |
| 8. | Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co | | yments or transfer a | any property on a | ccount of a c | debt that benefited an |
| | ■ No□ Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | | r this payment ditor's name |
| Pa | art 4: Identify Legal Actions, Repossession | ons, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankrup List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. | | ns, divorces, collectic | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of t | he case |
| 10. | Within 1 year before you filed for bankrup Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address | | | oreclosed, garnis | shed, attache | od, seized, or levied? Value of the property |
| 11. | Within 90 days before you filed for bankru | iptcy, did any creditor, in | | nancial institutior | n, set off any | amounts from your |
| | accounts or refuse to make a payment beNoYes. Fill in the details. | cause you owed a debt? | | | | |
| | Creditor Name and Address | Describe the action th | e creditor took | Date taker | action was | Amount |
| 12. | Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or | | erty in the possess | ion of an assigne | e for the ben | efit of creditors, a |
| | ■ No □ Yes | | | | | |
| Pa | art 5: List Certain Gifts and Contributions | | | | | |

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and Address:

Describe the gifts

Dates you gave the gifts

Value

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Debtor 1 Nylas Foster, III Case number (if known)

| 14. | Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or or | | , , , , , | ns with a tota | I value of more than | \$600 to any charity? |
|-----|--|-----------------|---|----------------|--|---------------------------|
| | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code | | Describe what you contributed | | Dates you contributed | Value |
| Par | | | | | | |
| 15. | | otcy or | since you filed for bankruptcy, did y | you lose anyt | hing because of the | ft, fire, other disaster |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Describe the property you lost and how the loss occurred | Include | ibe any insurance coverage for the lost the amount that insurance has paid. Lost claims on line 33 of Schedule A/B: | ist pending | Date of your loss | Value of property lost |
| Par | t 7: List Certain Payments or Transfers | ; | | | | |
| 16. | Within 1 year before you filed for bankrup consulted about seeking bankruptcy or purchase include any attorneys, bankruptcy petition purchase No | repari | ng a bankruptcy petition? | | | rty to anyone you |
| | Yes. Fill in the details. | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y | ou | Description and value of any propertransferred | erty | Date payment or transfer was made | Amount of payment |
| | CIN Legal Data Services Box 88229 Milwaukee, WI 53288 Clark & Washington | | \$70.00 Credit Counseling, Cred Reports, Tax Transcript | dit | 02/2023 | \$70.00 |
| 17. | Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that No Yes. Fill in the details. | litors o | r to make payments to your creditor | | r transfer any prope | rty to anyone who |
| | Person Who Was Paid Address | | Description and value of any propertransferred | erty | Date payment or transfer was made | Amount of payment |
| 18. | Within 2 years before you filed for bankru transferred in the ordinary course of you Include both outright transfers and transfers include gifts and transfers that you have alrest No | r busin made | ness or financial affairs? as security (such as the granting of a se | | | |
| | Yes. Fill in the details. | | | | | |
| | Person Who Received Transfer Address Person's relationship to you | | Description and value of property transferred | | any property or received or debts change | Date transfer was made |
| | i diddii di cialionalip lo you | | | | | |

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Debtor 1 Nylas Foster, III Case number (if known)

| 19. | within 10 years before you filed for bankruptc beneficiary? (These are often called asset-prote | | ny property to a | a self-settle | ed trust or similar device | of which you are a | 1 |
|-----|---|--|-------------------|---------------|--|--|----|
| | Yes. Fill in the details. | | | | | | |
| | Name of trust | Description and v | value of the pro | perty trans | sferred | Date Transfer wa | as |
| Pai | rt 8: List of Certain Financial Accounts, Instr | uments, Safe Deposi | t Boxes, and S | torage Uni | ts | | |
| 20 | Within 1 year hefere you filed for hankruptey | wore ony financial ac | sounts or inst | rumanta ha | old in your name, or for y | our bonofit aloos | J |
| 20. | Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associa | other financial accou | nts; certificate: | s of deposi | | , | · |
| | ■ No | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | |
| | | ast 4 digits of account number | Type of acco | ount or | Date account was closed, sold, moved, or transferred | Last balan before closing transi | or |
| 21. | Do you now have, or did you have within 1 year cash, or other valuables? | ar before you filed for | r bankruptcy, a | ny safe de | posit box or other depos | itory for securities | i, |
| | ■ No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe | the contents | Do you still have it? | |
| 20 | Have very atomed managements in a store as well as | · | | | | 2 | |
| 22. | Have you stored property in a storage unit or | place other than you | nome within | i year bero | re you filed for bankrupt | cy? | |
| | ■ No | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or l to it? Address (Number, S State and ZIP Code) | | Describe | the contents | Do you still have it? | |
| Pol | rt 9: Identify Property You Hold or Control fo | r Compone Floo | | | | | |
| Га | identify Property You Hold of Control to | i Someone Eise | | | | | |
| 23. | Do you hold or control any property that some for someone. | eone else owns? Incl | ude any prope | rty you bor | rowed from, are storing | for, or hold in trust | Ċ |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | Describe | the property | Val | ue |
| Pai | rt 10: Give Details About Environmental Inform | mation | | | | | |
| For | the purpose of Part 10, the following definition | s apply: | | | | | |
| | Environmental law means any federal, state, of toxic substances, wastes, or material into the regulations controlling the cleanup of these states. | air, land, soil, surfac | e water, groun | | | | or |
| | Site means any location, facility, or property a to own, operate, or utilize it, including disposa | • | environmental | law, wheth | er you now own, operate | e, or utilize it or us | ed |
| | Hazardous material means anything an enviro hazardous material, pollutant, contaminant, or | | as a hazardous | s waste, ha | zardous substance, toxi | c substance, | |

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Debtor 1 Nylas Foster, III Case number (if known)

| 24. | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | | | |
|-----|--|--|--|--------------------|--|--|--|
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | |
| 25. | Have you notified any governmental unit of any | y release of hazardous material? | | | | | |
| | ■ No □ Yes. Fill in the details. | No Yes. Fill in the details. | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | |
| 26. | Have you been a party in any judicial or admini | istrative proceeding under any envi | ronmental law? Include settlements a | nd orders. | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | | |
| Par | 11: Give Details About Your Business or Cor | nnections to Any Business | | | | | |
| 27. | Within 4 years before you filed for bankruptcy, | did you own a business or have an | y of the following connections to any | business? | | | |
| | ☐ A sole proprietor or self-employed in a | trade, profession, or other activity, | either full-time or part-time | | | | |
| | ☐ A member of a limited liability company | y (LLC) or limited liability partnersh | ip (LLP) | | | | |
| | ☐ A partner in a partnership | | | | | | |
| | ☐ An officer, director, or managing execu | tive of a corporation | | | | | |
| | ☐ An owner of at least 5% of the voting or | r equity securities of a corporation | | | | | |
| | ■ No. None of the above applies. Go to Part | 12. | | | | | |
| | Yes. Check all that apply above and fill in t | the details below for each business | 5. | | | | |
| | Business Name De Address | escribe the nature of the business | Employer Identification number | | | | |
| | | ame of accountant or bookkeeper | Do not include Social Security not or bookkeeper Dates business existed | | | | |
| 28. | Within 2 years before you filed for bankruptcy, institutions, creditors, or other parties. | did you give a financial statement t | to anyone about your business? Inclu | de all financial | | | |
| | ■ No | | | | | | |
| | Yes. Fill in the details below. | | | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | ate Issued | | | | | |

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Case number (if known) Debtor 1 Nylas Foster, III Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Nylas Foster, III Signature of Debtor 2 Nylas Foster, III Signature of Debtor 1 Date February 28, 2023 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

■ No

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| | | | Doc | <u>:ument Pa</u> | age 15 of 54 | | | |
|------------------|--|--------------------------|-------------------------|------------------------|---------------------------|--------------------------|-------------|---|
| Fill in th | is informa | ation to identify your | case and this filin | g: | | | | |
| Debtor 1 | | Nylas Foster, III | | | | | | |
| 20210 | | First Name | Middle Name | La | st Name | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if t | filing) | First Name | Middle Name | La | st Name | | | |
| United S | tates Bank | cruptcy Court for the: | NORTHERN DIST | RICT OF GEORG | IA - ATLANTA DIVISI | ON | | |
| Case nur | mhar | | | | | | _ | |
| Case Hui | | | | | | | | Check if this is an amended filing |
| | | | | | | | | amenaea ming |
| ~ | | 4004/5 | | | | | | |
| Officia | al Fori | m 106A/B | | | | | | |
| Sche | edule | A/B: Prop | ertv | | | | | 12/15 |
| | | | | t only once. If an as | sset fits in more than or | ne category, list the as | set in the | category where you |
| hink it fits | best. Be | as complete and accura | ate as possible. If two | married people are | filing together, both ar | e equally responsible | for supply | ying correct |
| | n. If more s ery questic | | a separate sneet to t | nis form. On the top | o of any additional page | es, write your name an | a case nu | imber (if Known). |
| | | | | | | | | |
| Part 1: | Describe Ea | ach Residence, Building | g, Land, or Other Rea | I Estate You Own o | r Have an Interest In | | | |
| 1. Do you | own or ha | ve any legal or equitabl | e interest in any resid | dence, building, land | d, or similar property? | | | |
| | | | | | | | | |
| _ | Go to Part 2 | | | | | | | |
| ☐ Yes. | Where is t | he property? | | | | | | |
| | | | | | | | | |
| Part 2: | Describe Yo | our Vehicles | | | | | | |
| | | | | | | | | |
| | | | | | ther they are register | | any vehic | eles you own that |
| someone | eise arive | s. If you lease a venic | ie, also report it on | scneaule G: Exect | utory Contracts and U | nexpirea Leases. | | |
| 3. Cars , | vans, truc | ks, tractors, sport u | tility vehicles, mot | orcycles | | | | |
| □ No | | | | | | | | |
| | | | | | | | | |
| Yes | | | | | | | | |
| | _ | | | | | Do not doduct cook | urad alaimu | or exemptions Dut |
| 3.1 Ma | | ord | Who has a | an interest in the pr | operty? Check one | | | s or exemptions. Put aims on <i>Schedule D:</i> |
| | —————————————————————————————————————— | usion | Debtor | • | | Creditors Who Hav | re Claims S | Secured by Property. |
| | |)16 | Debtor | • | | Current value of the | | urrent value of the |
| | oproximate i ther informa | | | 1 and Debtor 2 only | | entire property? | р | ortion you own? |
| | inei inioima | uon. | | t one of the debtors a | and another | | | |
| | | | ☐ Check | if this is community | v property | \$11,000 | .00 | \$11,000.00 |
| | | | | structions) | | | | |
| | | | | | | | | |
| 3.2 Ma | ake: A | udi | Who has | an interest in the pr | operty? Check one | | | s or exemptions. Put aims on Schedule D: |
| Мо | odel: Q | 5 | □ Debtor | 1 only | | | | Secured by Property. |
| Υe | ear: 20 |)11 | □ Debtor | 2 only | | Current value of the | he C | urrent value of the |
| Ap | oproximate i | mileage: 87 | 7000 Debtor | 1 and Debtor 2 only | | entire property? | | ortion you own? |
| Ot | ther informa | tion: | At leas | t one of the debtors a | and another | | | |
| | | | _ | | | \$11,300 | 00 | ¢E 6E0 00 |
| | | | | if this is community | y property | φ11,300. | | \$5,650.00 |
| 1 | | | , | , | | | | |

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| Debtor 1 | Nylas Foster, | III | | Case numb | oer (if known) | |
|----------------|--|---|--|------------------------|----------------------|---|
| 3.3 Make | · Volkswag | en | Who has an interest in the property? Ch | | | claims or exemptions. Put ed claims on Schedule D: |
| Mode | el: Passat | | Debtor 1 only | | | ims Secured by Property. |
| Year: | 2011 | | Debtor 2 only | Cur | rent value of the | Current value of the |
| Appro | oximate mileage: | | ☐ Debtor 1 and Debtor 2 only | enti | re property? | portion you own? |
| Other | r information: | | At least one of the debtors and another | • | | |
| | | | Check if this is community property (see instructions) | | \$2,700.00 | \$1,350.00 |
| | | | nd other recreational vehicles, other ve atercraft, fishing vessels, snowmobiles, m | | | |
| ☐ Yes | | | | | | |
| | | | | | | |
| | | | n for all of your entries from Part 2, in that number here | | | \$18,000.00 |
| | = | | | | | |
| | | al and Household It gal or equitable in | ems terest in any of the following items? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | old goods and fu | | s, china, kitchenware | | | ciaims or exemptions. |
| □ No | es. Major appliant | es, iumiture, imens | s, cillia, kitcheriware | | | |
| _ | Describe | | | | | |
| — 103. | Describe | | | | | |
| | | 2 BR, LR, DR | | | | \$1,000.00 |
| , □ No | es: Televisions an | ohones, cameras, r | eo, stereo, and digital equipment; compu nedia players, games | uters, printers, scann | iers; music collecti | |
| | | 2 IV, 1 Comput | er, 1 Cell Phone | | | \$800.00 |
| Example No | oles of value es: Antiques and f other collection | igurines; paintings, ns, memorabilia, co | prints, or other artwork; books, pictures, illectibles | or other art objects; | stamp, coin, or ba | aseball card collections; |
| | ent for sports and es: Sports, photog musical instru | raphic, exercise, a | nd other hobby equipment; bicycles, pool | tables, golf clubs, s | kis; canoes and ka | ayaks; carpentry tools; |
| ☐ Yes. | Describe | | | | | |
| _ ` | | shotguns, ammun | ition, and related equipment | | | |
| ■ No □ Yes. | Describe | | | | | |
| 11. Clothes | | thes, furs, leather o | oats, designer wear, shoes, accessories | | | |

Case 23-51911-jwc Doc 1 Filed 02/28/23 Entered 02/28/23 12:53:24 Desc Main Document Page 17 of 54 Debtor 1 Nylas Foster, III Case number (if known) Yes. Describe..... \$100.00 Clothes/Shoes 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,900.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ No Yes..... Cash \$20.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... Wells Fargo \$700.00 17.1. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts □ No Institution or issuer name: Yes..... \$30.00 Acorn 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

Case 23-51911-jwc Doc 1 Filed 02/28/23 Entered 02/28/23 12:53:24 Page 18 of 54 Document Debtor 1 Nylas Foster, III Case number (if known) ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401(k) **Transamerica** \$989.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

Official Form 106A/B Schedule A/B: Property page 4

No

☐ Yes. Give specific information..

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Debtor 1 Nylas Foster, III Case number (if known)

31. Interests in insurance policies

Examples: Health, displiit, or life insurance; health sovings account (HSA); gradit, hemogypasis, or reptor's insurance

| _ | Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's | insurar | nce |
|--------------|---|----------|----------------------------|
| | No | | |
| | Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: | | Surrender or refund value: |
| _ | Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled someone has died. | d to rec | eive property because |
| | No | | |
| | Yes. Give specific information | | |
| _ | Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No | | |
| | Yes. Describe each claim | | |
| | Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and ri ■ No | ights to | set off claims |
| | Yes. Describe each claim | | |
| | Any financial assets you did not already list ■ No | | |
| | Yes. Give specific information | | |
| 36. | Add the dollar value of all of your entries from Part 4, including any entries for pages you have attach for Part 4. Write that number here | ned | \$1,739.00 |
| Part | 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. | | |
| 37. [| Oo you own or have any legal or equitable interest in any business-related property? | | |
| | No. Go to Part 6. | | |
| | Yes. Go to line 38. | | |
| Part | 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. | | |
| 46. | Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property | ? | |
| | No. Go to Part 7. | | |
| | Yes. Go to line 47. | | |
| Part | 7: Describe All Property You Own or Have an Interest in That You Did Not List Above | | |
| _ | Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership | | |
| | No Yes. Give specific information | | |
| 54. | Add the dollar value of all of your entries from Part 7. Write that number here | | \$0.00 |

Official Form 106A/B Schedule A/B: Property page 5

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Debtor 1 Nylas Foster, III Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$18,000.00 57. Part 3: Total personal and household items, line 15 \$1,900.00 58. Part 4: Total financial assets, line 36 \$1,739.00 Part 5: Total business-related property, line 45 59. \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$21,639.00 \$21,639.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$21,639.00

Official Form 106A/B Schedule A/B: Property page 6

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| Fill in this inform | ation to identify your | case: | | | |
|---------------------|------------------------|-------------------|------------------------|----------|---------------------|
| Debtor 1 | Nylas Foster, III | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ban | kruptcy Court for the: | NORTHERN DISTRICT | OF GEORGIA - ATLANTA I | DIVISION | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an |
| | | | | | amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | e Amount of the exemption you claim | | Specific laws that allow exemption | |
|---|--------------------------------------|-------------------------------------|---|------------------------------------|--|
| Conculation of the time property | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | | |
| 2016 Ford Fusion 122000 miles Line from Schedule A/B: 3.1 | \$11,000.00 | | \$1,660.00 | O.C.G.A. § 44-13-100(a)(3) | |
| Ellie Holli Genedale 24 B. G.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 2011 Audi Q5 87000 miles Line from Schedule A/B: 3.2 | \$5,650.00 | | \$1,660.00 | O.C.G.A. § 44-13-100(a)(3) | |
| LINE HOLL SCHEDULE PAB. 3.2 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 2011 Volkswagen Passat Line from Schedule A/B: 3.3 | \$1,350.00 | | \$1,680.00 | O.C.G.A. § 44-13-100(a)(3) | |
| Line non schedule AVB. 5.5 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 2 BR, LR, DR Line from Schedule A/B: 6.1 | \$1,000.00 | | \$1,000.00 | O.C.G.A. § 44-13-100(a)(4) | |
| Line from Scriedule A/B. 0.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 2 TV, 1 Computer, 1 Cell Phone Line from Schedule A/B: 7.1 | \$800.00 | | \$800.00 | O.C.G.A. § 44-13-100(a)(4) | |
| Line nom ochequie A/D. 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | |

| Del | ebtor 1 Nylas Foster, III | | | Case number (if known) | | |
|-----|--|--------------------------------------|---------|---|------------------------------------|--|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption | |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | |
| | Clothes/Shoes Line from Schedule A/B: 11.1 | \$100.00 | | \$100.00 | O.C.G.A. § 44-13-100(a)(4) | |
| _ | Line Holli Governo, V.E. T.T. | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Cash Line from Schedule A/B: 16.1 | \$20.00 | | \$20.00 | O.C.G.A. § 44-13-100(a)(6) | |
| _ | Life from Schedule A/B. 10.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Checking: Wells Fargo Line from Schedule A/B: 17.1 | \$700.00 | | \$700.00 | O.C.G.A. § 44-13-100(a)(6) | |
| | Line from Schedule A/B. 17.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Acorn Line from Schedule A/B: 18.1 | \$30.00 | | \$30.00 | O.C.G.A. § 44-13-100(a)(6) | |
| | Line from Schedule A/B. 10.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | 401(k): Transamerica | \$989.00 | | \$989.00 | O.C.G.A. § 44-13-100(a)(2.1)(D) | |
| | Life from Schedule A/B. 21.1 | | | 100% of fair market value, up to any applicable statutory limit | 44-13-100(a)(2.1)(b) | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/25 and every | | | led on or after the date of adjustmer | ıt.) | |
| | - | | المائدة | OAE days before you filed this accept | | |
| | ☐ Yes. Did you acquire the property cove☐ No | red by the exemption wi | unin T | ,215 days before you filed this case | t | |
| | | | | | | |
| | ☐ Yes | | | | | |

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| | | | Document P | age 23 (| of 54 | | |
|---------------|--|--------------------------|---|---------------|--|--|--------------------------|
| Fill i | n this inform | ation to identify you | ır case: | | | | |
| Debt | tor 1 | Nylas Foster, III | | | | | |
| | | First Name | Middle Name La | ast Name | | | |
| Debt (Spou | tor 2 se if, filing) | First Name | Middle Name La | ast Name | | | |
| Unite | ed States Banl | kruptcy Court for the: | NORTHERN DISTRICT OF GEOR | GIA - ATLA | NTA DIVISION | | |
| Coo | | | | | | | |
| (if kno | e number | | | | | ☐ Check | if this is an |
| | | | | | | _ | led filing |
| | cial Form hedule [| | Who Have Claims Se | ecured | by Property | y | 12/15 |
| is nee | | | If two married people are filing together, bout, number the entries, and attach it to the | | | | |
| | • • | ave claims secured by | your property? | | | | |
| [| J No. Check t | this box and submit tl | nis form to the court with your other sch | nedules. You | u have nothing else to | o report on this form. | |
| | _ | all of the information | ŕ | | 3 | | |
| Part | | Secured Claims | Solow. | | | | |
| | | | more than one secured claim, list the creditor | r senarately | Column A | Column B | Column C |
| for ea | ach claim. If mo | re than one creditor has | a particular claim, list the other creditors in I cal order according to the creditor's name. | | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 | Exeter Fina | ance LLC | Describe the property that secures the | claim: | \$19,116.00 | \$11,300.00 | \$7,816.00 |
| | Creditor's Name | _ | 2011 Audi Q5 87000 miles | | <u> </u> | · · · · · · · · · · · · · · · · · · · | - |
| | Attn: Bank Po Box 166 Irving, TX 7 | 8008 | As of the date you file, the claim is: Checapply. Contingent | ck all that | | | |
| | Number, Street, 0 | City, State & Zip Code | ☐ Unliquidated | | | | |
| Who | owes the deb | t? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| □D | ebtor 1 only | | ■ An agreement you made (such as mort | taage or secu | red | | |
| □ D | ebtor 2 only | | car loan) | J .J | | | |
| | ebtor 1 and Deb | otor 2 only | ☐ Statutory lien (such as tax lien, mechan | nic's lien) | | | |
| A | t least one of the | e debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| | heck if this claic | | ☐ Other (including a right to offset) | | | | |

Opened 06/22 Last Active

Date debt was incurred 10/17/22

1001

Last 4 digits of account number

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| Debtor 1 Nylas Foster, III | Case number (if known) | | | | |
|---|--|-------------|-------------|-------------|--|
| First Name Middle N | ame Last Name | · | | | |
| 2.2 Turn and Burn Motors | Describe the property that secures the claim: | \$23,000.00 | \$11,000.00 | \$12,000.00 | |
| Creditor's Name | 2016 Ford Fusion 122000 miles | | | | |
| | | | | | |
| 1794 Iris Dr SW Conyers, GA 30094 | As of the date you file, the claim is: Check all that apply. Contingent | | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | | |
| | ☐ Disputed | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | An agreement you made (such as mortgage or se | ecured | | | |
| Debtor 2 only | car loan) | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | | |
| At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | | | | |
| Date debt was incurred | Last 4 digits of account number | | | | |
| | | | | | |
| 2.3 Vehicle Solutions | | ¢40 000 00 | ¢2.700.00 | £42 200 00 | |
| Finance | Describe the property that secures the claim: | \$16,000.00 | \$2,700.00 | \$13,300.00 | |
| Creditor's Name | 2011 Volkswagen Passat | | | | |
| | | | | | |
| 104 Crandon Blvd | As of the date you file, the claim is: Check all that | | | | |
| Key Biscayne, FL 33149 | apply. ☐ Contingent | | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | | |
| Number, Street, Sky, State & Zip State | ☐ Disputed | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | ■ An agreement you made (such as mortgage or se | acurad | | | |
| ☐ Debtor 2 only | car loan) | soureu | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | | |
| At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | | | | |
| Date debt was incurred | Last 4 digits of account number | | | | |
| | | | | | |
| Add the dollar value of your entries in C | Column A on this page. Write that number here: | \$58,116.0 | 0 | | |
| If this is the last page of your form, add | the dollar value totals from all pages. | \$58,116.0 | 0 | | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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| | | | Document | Page | 25 of 5 | 54 | | | |
|----------|-----------------------------------|--|--|--------------------------------|----------------|-------------------------|--------------------|-----------------|-------------|
| Fill ir | this inforn | nation to identify your ca | se: | | | | | | |
| Debto | or 1 | Nylas Foster, III | | | | | | | |
| Dobit | J | First Name | Middle Name | Last Nan | ne | | | | |
| Debto | | | | | | | | | |
| (Spous | se if, filing) | First Name | Middle Name | Last Nan | ne | | | | |
| Unite | d States Ba | nkruptcy Court for the: | NORTHERN DISTRICT OF G | EORGIA - | - ATLANTA | DIVISION | | | |
| Case | number | | | | | | | | |
| (if knov | | | | | | | ☐ CI | neck if this is | an |
| | | | | | | | ar | nended filing | j |
| ⊃ffi. | oial Earn | 106E/E | | | | | | | |
| | | <u>106E/F</u> | a Hawa Haaaawaad | Claim | | | | 40/ | IA E |
| | | | O Have Unsecured Part 1 for creditors with PRIORIT | | | | | 12/ | |
| | and case nun | tinuation Page to this page. nber (if known). Il of Your PRIORITY Unse | If you have no information to re ecured Claims | port in a P | art, do not f | ile that Part. On the t | op of any additi | onal pages, v | vrite your |
| 1. D | o any credito | ors have priority unsecured | claims against you? | | | | | | |
| | No. Go to P | art 2. | | | | | | | |
| | Yes. | | | | | | | | |
| id po | lentify what typossible, list the | be of claim it is. If a claim has a claims in alphabetical order | If a creditor has more than one price both priority and nonpriority amour according to the creditor's name. If cular claim, list the other creditors | nts, list that f you have r | claim here a | nd show both priority a | and nonpriority ar | mounts. As mu | uch as |
| (F | or an explana | ation of each type of claim, see | e the instructions for this form in the | e instructio | n booklet.) | | | | |
| | | | | | | Total claim | Priority amount | Nonpri amoun | |
| 2.1 | Georgia | Department of Rever | ue Last 4 digits of accou | ınt numbe | r | \$1,000.00 | \$1,000 | | \$0.00 |
| | Priority Cre | editor's Name | | | | | | | |
| | | ance Division | When was the debt in | curred? | 2021 | | - | | |
| | | Bankruptcy entury BLVD NE Suite | 9100 | | | | | | |
| | Atlanta, | GA 30345-3202 | | | | | | | |
| | | treet City State Zip Code | As of the date you file | e, the clain | ı is: Check a | Ill that apply | | | |
| | _ | the debt? Check one. | ☐ Contingent | | | | | | |
| | Debtor 1 o | nly | ☐ Unliquidated | | | | | | |
| | Debtor 2 o | nly | ☐ Disputed | | | | | | |
| | Debtor 1 a | nd Debtor 2 only | Type of PRIORITY un | secured cl | aim: | | | | |
| | ☐ At least on | e of the debtors and another | ☐ Domestic support of | bligations | | | | | |
| | ☐ Check if t | his claim is for a communit | y debt Taxes and certain of | other debts | you owe the | government | | | |
| ı | Is the claim s | subject to offset? | ☐ Claims for death or | personal ir | njury while yo | u were intoxicated | | | |
| | No | | Other. Specify | | | | | | |
| | ☐ Yes | | Ta | axes | | | | | |

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| Debtor 1 Nylas F | oster, III | Case | number (if known) | | |
|---|--|---|----------------------|------------|--------|
| | county Child Support | Last 4 digits of account number | \$0.00 | \$0.00 | \$0.00 |
| | itution Blvd SW #200 eville, GA 30046 | When was the debt incurred? | | | |
| Number Stree | et City State Zip Code | As of the date you file, the claim is: Check | call that apply | | |
| Who incurred th | he debt? Check one. | ☐ Contingent | | | |
| ■ Debtor 1 only | У | ☐ Unliquidated | | | |
| Debtor 2 only | V | ☐ Disputed | | | |
| Debtor 1 and | • | Type of PRIORITY unsecured claim: | | | |
| | of the debtors and another | ■ Domestic support obligations | | | |
| | s claim is for a community debt | ☐ Taxes and certain other debts you owe the | ha gavarnmant | | |
| Is the claim sub | <u>•</u> | ☐ Claims for death or personal injury while | = | | |
| ■ No | 5,000 10 0110011 | Other. Specify | you word intoxidated | | |
| ☐ Yes | | Notice Only | | | |
| | | | | | |
| 2.3 IRS | | Last 4 digits of account number | \$2,000.00 | \$2,000.00 | \$0.00 |
| Priority Credit 401 W. Pe Stop #334 Room 400 Atlanta, G | eachtree St., NW 4-D 0 | When was the debt incurred? 2021 | | | |
| | et City State Zip Code | As of the date you file, the claim is: Check | call that apply | | |
| Who incurred th | he debt? Check one. | ☐ Contingent | | | |
| ■ Debtor 1 only | y | ☐ Unliquidated | | | |
| Debtor 2 only | У | Disputed | | | |
| Debtor 1 and | Debtor 2 only | Type of PRIORITY unsecured claim: | | | |
| _ | of the debtors and another | ☐ Domestic support obligations | | | |
| | s claim is for a community debt | Taxes and certain other debts you owe the | ne government | | |
| Is the claim sub | · · · · · · · · · · · · · · · · · · · | ☐ Claims for death or personal injury while | = | | |
| ■ No | ., | ☐ Other. Specify | , | | |
| ☐ Yes | | Taxes | | | |
| | | | | | |
| 2.4 Nicole Fost Priority Credit | | Last 4 digits of account number | \$0.00 | \$0.00 | \$0.00 |
| · | | When was the debt incurred? | | | |
| Unknown | | | | | |
| | et City State Zip Code he debt? Check one. | As of the date you file, the claim is: Check | call that apply | | |
| | | Contingent | | | |
| Debtor 1 only | • | Unliquidated | | | |
| Debtor 2 only | | ☐ Disputed | | | |
| Debtor 1 and | Debtor 2 only | Type of PRIORITY unsecured claim: | | | |
| At least one of | of the debtors and another | Domestic support obligations | | | |
| ☐ Check if this | s claim is for a community debt oject to offset? | ☐ Taxes and certain other debts you owe th☐ Claims for death or personal injury while | • | | |
| ■ No | | Other. Specify | | | |
| ☐ Yes | | Child Support | | | |
| | | | | | |
| Part 2: List All o | of Your NONPRIORITY Unsecu | ured Claims | | | |
| 3. Do any creditors | have nonpriority unsecured clain | ns against you? | | | |
| ☐ No. You have | nothing to report in this part. Submit | this form to the court with your other schedules | 3. | | |
| | . | , | | | |
| Part 2: List All of 3. Do any creditors | have nonpriority unsecured clain | ured Claims ns against you? | j. | | _ |

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of

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Case number (if known)

| Pa | art 2. | | | |
|-----|--|--|---|-------------|
| | | | | Total claim |
| 4.1 | Acima Credit Nonpriority Creditor's Name | Last 4 digits of account number | 9496 | \$5,090.00 |
| | 9815 South Monroe Street | | Opened 01/22 Last Active | |
| | 4th Floor | When was the debt incurred? | 2/03/22 | _ |
| | Sandy, UT 84070 | | in Charle all that apply | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Cneck all that apply | |
| | ■ Debtor 1 only | Пол | | |
| | | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| | ☐ At least one of the debtors and another | Student loans | d Claim. | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | ifation agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| | □Yes | Other. Specify Lease | | - |
| 4.2 | American Financial | Last 4 digits of account number | 6704 | \$6.026.00 |
| 4.2 | Nonpriority Creditor's Name | Last 4 digits of account number | 6701 | \$6,936.00 |
| | Attn: Bankruptcy | | Opened 12/19 Last Active | |
| | 6400 Winchester Road | When was the debt incurred? | 11/22 | - |
| | Memphis, TN 38115 Number Street City State Zip Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | , | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | ☐ Obligations arising out of a sepa | | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | ☐ Debts to pension or profit-sharin | | |
| | Yes | Other. Specify Automobile | 9 | _ |
| 4.3 | American First Finance | Last 4 digits of account number | 0003 | \$2,108.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy | | Opened 6/01/22 Last Active | |
| | Po Box 565848 | When was the debt incurred? | 8/17/22 | |
| | Dallas, TX 75356 | _ | | - |
| | Number Street City State Zip Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | _ | | |
| | Debtor 1 only | Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | d alata. | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | a ciaim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| | Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify Lease | | |
| | | - Other. Specify - Codo | | _ |

| Debto | Nylas Foster, III | Case number (if known) | | | | |
|-------|--|--|---|----------|--|--|
| 4.4 | American First Finance | Last 4 digits of account number | 0004 | \$481.00 | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 565848 | When was the debt incurred? | Opened 7/29/22 Last Active 8/24/22 | | | |
| | Dallas, TX 75356 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | tration agreement or divorce that you did not | | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | | | |
| | Yes | Other. Specify Lease | | | | |
| 4.5 | Capio Partners, LLC | Last 4 digits of account number | 2980 | \$70.00 | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3498 | When was the debt incurred? | Opened 09/22 | | | |
| | Sherman, TX 75091 | | | | | |
| | Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | | | |
| | Who incurred the debt? Check one. | _ | | | | |
| | Debtor 1 only | Contingent | | | | |
| | Debtor 2 only | Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | Label a | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | d claim: | | | |
| | ☐ Check if this claim is for a community debt | | | | | |
| | Is the claim subject to offset? | report as priority claims | tration agreement or divorce that you did not | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | |
| | □Yes | ■ Other. Specify | Attorney Walker Lake Group Pc | | | |
| 4.6 | Carter-Young | Last 4 digits of account number | 2362 | \$140.00 | | |
| | Nonpriority Creditor's Name Attention: Bankruptcy 120 2nd St, 2nd Floor Monroe, GA 30655 | When was the debt incurred? | Opened 06/19 Last Active 01/19 | | | |
| | Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | | | |
| | Who incurred the debt? Check one. | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | |
| | No | Debts to pension or profit-sharir | g plans, and other similar debts | | | |
| | — NO | · | Attorney South Gwinnett | | | |
| | Yes | Other. Specify Radiology | Autorney Journ Owninett | | | |

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Case number (if known)

| Debte | or 1 Nylas Foster, III | | Case number (if known) | | | | | | |
|-------|---|---|---|------------|--|--|--|--|--|
| 4.7 | First Premier Bank Nonpriority Creditor's Name | Last 4 digits of account number | 0043 | \$456.00 | | | | | |
| | Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117 | When was the debt incurred? | Opened 08/15 Last Active 1/20/16 | | | | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | | | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | | |
| | Yes | Other. Specify Credit Card | <u> </u> | | | | | | |
| 4.8 | First Premier Bank Nonpriority Creditor's Name | Last 4 digits of account number | 1820 | \$449.00 | | | | | |
| | Attn: Bankruptcy Po Box 5524 | When was the debt incurred? | Opened 08/22 Last Active 10/22 | | | | | | |
| | Sioux Falls, SD 57117 Number Street City State Zip Code | As of the date you file, the claim | As of the date you file, the claim is: Check all that apply | | | | | | |
| | Who incurred the debt? Check one. | , | | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | | |
| | Yes | ■ Other. Specify Credit Card | | | | | | | |
| 4.9 | Jefferson Capital Systems, LLC Nonpriority Creditor's Name | Last 4 digits of account number | 2003 | \$1,139.00 | | | | | |
| | Attn: Bankruptcy 16 McIeland Road | When was the debt incurred? | Opened 10/20 Last Active 04/18 | | | | | | |
| | Saint Cloud, MN 56303 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | | |
| | Debtor 2 only | ☐ Debtor 2 only ☐ Unliquidated | | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Debtor 1 and Debtor 2 only ☐ Disputed | | | | | | | |
| | ☐ At least one of the debtors and another | d claim: | | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | | |
| | ☐ Yes | Factoring (Other. Specify Wireless | Company Account Verizon | | | | | | |

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| Debt | or 1 Nylas Foster, III | Case number (if known) | | | | | |
|----------|---|--|---|------------|--|--|--|
| 4.1 | | | | 44 000 00 | | | |
| 0 | Leaseville | Last 4 digits of account number | | \$1,600.00 | | | |
| | Nonpriority Creditor's Name 1100 Glendon Ave | When was the debt incurred? | | | | | |
| | Los Angeles, CA 90024 | When was the dept incurred? | | | | | |
| | Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | | | | |
| | Who incurred the debt? Check one. | • | , | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | | ☐ Unliquidated | | | | | |
| | Debtor 2 only | ' | | | | | |
| | Debtor 1 and Debtor 2 only | Disputed | | | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | ed claim: | | | | |
| | ☐ Check if this claim is for a community | Student loans | | | | | |
| | debt | | aration agreement or divorce that you did not | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | |
| | No | Debts to pension or profit-shari | ng plans, and other similar debts | | | | |
| | Yes | Other. Specify Account | | | | | |
| 4.1 | Santander Consumer USA | | 1000 | \$9,523.00 | | | |
| 1 | Nonpriority Creditor's Name | Last 4 digits of account number | | ψ9,323.00 | | | |
| | Attn: Bankruptcy | | Opened 06/15 Last Active | | | | |
| | Po Box 961245 | When was the debt incurred? | 10/19/17 | | | | |
| | Fort Worth, TX 76161 | _ | | | | | |
| | Number Street City State Zip Code | As of the date you file, the claim | | | | | |
| | Who incurred the debt? Check one. | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt | ☐ Obligations arising out of a sep | | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | |
| | ■ No | Debts to pension or profit-shari | | | | | |
| | Yes | ■ Other. Specify Automobil | | | | | |
| | | | | | | | |
| 4.1 2 | True Accord | Last 4 digits of account number | | \$1,139.00 | | | |
| | Nonpriority Creditor's Name | When was the debt incurred? | | | | | |
| | 16011 College Blvd Suite 130 | When was the dept incurred? | | | | | |
| | Lenexa, KS 66219 | | | | | | |
| | Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | | | | |
| | Who incurred the debt? Check one. | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | | Type of NONPRIORITY unsecure | ed claim: | | | | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | | | | |
| | ☐ Check if this claim is for a community debt | _ | | | | | |
| | Is the claim subject to offset? | Obligations arising out of a sep- report as priority claims | | | | | |
| | ■ No | Debts to pension or profit-shari | ng plans, and other similar debts | | | | |
| | ■ NO Yes | Other Specify Account | 51 | | | | |
| | LIYES | Other Specify ACCOUNT | | | | | |

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| Debtor | 1 Nylas Foster, III | | Case number (if known) | | | | | | |
|----------|--|--|--|--------------|--|--|--|--|--|
| 4.1 | United Auto Acceptance | Last 4 digits of account number | 7126 | \$12,068.00 | | | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Dept. P.O. Box 926 | When was the debt incurred? | Opened 9/01/19 Last Active 2/05/20 | | | | | | |
| | Morrow, GA 30260 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | | | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | | | | | | | |
| | Yes | Other. Specify Automobile | • | | | | | | |
| 4.1 | USDOE/GLELSI | Last 4 digits of account number | 7581 | \$245,712.00 | | | | | |
| | Nonpriority Creditor's Name 2401 International Lane Madison, WI 53704 | When was the debt incurred? | Opened 11/21 Last Active 1/01/23 | | | | | | |
| | Number Street City State Zip Code | As of the date you file, the claim i | s: Check all that apply | | | | | | |
| | Who incurred the debt? Check one. | | | | | | | | |
| | Debtor 1 only | Contingent | | | | | | | |
| | Debtor 2 only | Unliquidated | | | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | | | | | | | |
| | ☐ Check if this claim is for a community | Student loans | | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | | | | | | |
| | No | Debts to pension or profit-sharing | | | | | | | |
| | Yes | ☐ Other. Specify | | | | | | | |
| | | Educationa | <u> </u> | | | | | | |
| 4.1 5 | Westlake Portfolio Management, LLC Nonpriority Creditor's Name | Last 4 digits of account number | 6002 | \$13,381.00 | | | | | |
| | Attn: Bankruptcy Po Box 76809 Los Angeles, CA 90054 | When was the debt incurred? | Opened 12/21 Last Active 1/13/23 | | | | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | | | | | | |
| | ☐ Check if this claim is for a community | Student loans | | | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not | | | | | | | |
| | No | report as priority claims Debts to pension or profit-sharing plans, and other similar debts | | | | | | | |
| | Yes | · | | | | | | | |
| | Li Tes | Other. Specify Automobile | · | | | | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

Debtor 1 Nylas Foster, III

Case number (if known)

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|-----------------------|-----|---|-----|------------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 3,000.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 3,000.00 |
| | | | | Total Claim |
| Total | 6f. | Student loans | 6f. | \$ 245,712.00 |
| claims from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that | | 0.00 |
| | | you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 54,580.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 300,292.00 |

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| Fill in this informa | | | | | |
|---|-------------------|-------------------|------------------------|---------|------------------------------------|
| Debtor 1 | Nylas Foster, III | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF GEORGIA - ATLANTA D | IVISION | |
| Case number | | | | | Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | whom you have the r, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | _ |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | | | | | |

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| Fill in thi | is information to identify your | case: | · | | |
|-------------------------------------|--|---|---|---|--|
| Debtor 1 | Nylas Foster, III | | | | |
| Debtor 2 | First Name | Middle Name | Last Name | | |
| (Spouse if, f | iling) First Name | Middle Name | Last Name | | |
| United St | tates Bankruptcy Court for the: | NORTHERN DISTRIC | CT OF GEORGIA - ATLAN | TA DIVISION | |
| Case nur | mber | | | | |
| (if known) | | | | | Check if this is an amended filing |
| Officia | al Form 106H | | | | |
| | dule H: Your Cod | ebtors | | | 12/15 |
| people ar ill it out, our nam | s are people or entities who a re filing together, both are equ and number the entries in the re and case number (if known) by you have any codebtors? (If | ally responsible for su boxes on the left. Atta . Answer every questi | ipplying correct information the Additional Page to on. | on. If more space is need this page. On the top of | led, copy the Additional Page, |
| | , | you are ming a joint oas | o, do not list officer spoude t | as a obaction. | |
| □ No ■ Ye | | | | | |
| ■ Y€ | es | | | | |
| | ithin the last 8 years, have you ona, California, Idaho, Louisiana, | | | | ates and territories include |
| ■ No | o. Go to line 3. | | | | |
| □ Ye | es. Did your spouse, former spou | use, or legal equivalent | live with you at the time? | | |
| in lin Form | ne 2 again as a codebtor only i | f that person is a guar | antor or cosigner. Make s | ure you have listed the o | ith you. List the person shown reditor on Schedule D (Official nedule E/F, or Schedule G to fill |
| | Column 1: Your codebtor Name, Number, Street, City, State and Z | P Code | | Column 2: The creditor Check all schedules the | or to whom you owe the debt nat apply: |
| 3.1 | Jovan Hills 931 Greenleaf Road Conyers, GA 30013 | | | ■ Schedule D, line □ Schedule E/F, lin □ Schedule G Exeter Finance LLC | e |
| 3.2 | Lanae Powell 931 Greenleaf Road Conyers, GA 30013 | | | ■ Schedule D, line □ Schedule E/F, lin □ Schedule G Vehicle Solutions I | e |

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

| Fill | in this information to identify your ca | ase: | | | | | | | |
|--------------------|---|---|---|--------------------------|----------------------------|----------------------------|---|------------------------------|-----------------|
| | otor 1 Nylas Foste | | | | | | | | |
| 1 | otor 2 use, if filing) | | | | _ | | | | |
| Uni | ted States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF GEORGIA - AT | ΓLANTA | _ | | | | |
| (If kr | fficial Form 106l | | | | | | ed filing ent showing as of the fol | postpetition lowing date: | chapter |
| - | chedule I: Your Inc | ome | | | | IVIIVI / DD/ 1 | 111 | | 12/15 |
| Be a sup spo | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. | sible. If two married peo are married and not filir r spouse is not filing wi | ng jointly, and your sith you, do not include | spouse is de inform | s living wit nation abo | h you, incl ut your spo | ude inform ouse. If mo | ation about re space is r | your needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor 2 | 2 or non-fili | ng spouse | |
| | If you have more than one job, attach a separate page with information about additional | Formularium austratura | ■ Employed | | | ☐ Employed | | | |
| | | Employment status | ☐ Not employed | | | ☐ Not employed | | | |
| | employers. | Occupation | Mental Health T | Mental Health Technician | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Grady Hospital | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 80 Jesse Hill Jr. Atlanta, GA 303 | | SE | | | | |
| | | How long employed the | here? 2 Years | i | | | | | |
| Par | t 2: Give Details About Mor | nthly Income | | | | | | | |
| | mate monthly income as of the dause unless you are separated. | ate you file this form. If y | you have nothing to re | eport for a | any line, wr | ite \$0 in the | space. Incl | ude your nor | n-filing |
| | u or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the information | n for all ei | mployers fo | or that perso | on on the lin | es below. If y | ou need |
| | | | | | For D | ebtor 1 | For Deb | tor 2 or g spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 3,622.00 | \$ | N/A | |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income. Add lin | ne 2 + line 3. | | 4. | \$3, | 622.00 | \$ | N/A | |

Official Form 106l Schedule I: Your Income page 1

| Debt | tor 1 | Nylas Foster, III | - | Case | number (if known) | | | |
|------|-----------------------|---|------------|-----------|-------------------|------------------|-----------------------|-----------|
| | | | | For | Debtor 1 | | Debtor 2 or | |
| | Cor | by line 4 here | 4. | \$ | 3,622.00 | \$ | filing spouse N/A | _ |
| _ | 1 !-4 | | | | · | | | _ |
| 5. | | all payroll deductions: | _ | • | 400.00 | • | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$_ | 436.00 | \$ | N/A | _ |
| | 5b. 5c. | Mandatory contributions for retirement plans Voluntary contributions for retirement plans | 5b. 5c. | \$_ \$ | 0.00 | \$ | N/A N/A | _ |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 30.00 0.00 | · | N/A N/A | _ |
| | 5e. | Insurance | 5e. | \$_ | 59.00 | \$ | N/A | _ |
| | 5f. | Domestic support obligations | 5f. | \$- | 0.00 | * * — | N/A | _ |
| | 5g. | Union dues | 5g. | \$_ | 0.00 | \$ | N/A | _ |
| | 5h. | Other deductions. Specify: | 5h | + \$_ | 0.00 | + \$ | N/A | <u> </u> |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 525.00 | \$ | N/A | 1 |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 3,097.00 | \$ | N/A | \ |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | · | | | _ |
| | | monthly net income. | 8a. | \$ | 0.00 | \$ | N/A | |
| | 8b. | Interest and dividends | 8b. | \$_ | 0.00 | \$ | N/A | _ |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce | | \$ | 0.00 | ф. | | _ |
| | 8d. | settlement, and property settlement. Unemployment compensation | 8c. 8d. | \$_ | 0.00 | \$ | N/A N/A | _ |
| | 8e. | Social Security | 8e. | -\$ - | 0.00 | · \$ | N/A | _ |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | e 8f. | \$ | 0.00 | \$ | N/A | _ |
| | 8g. | Pension or retirement income | 8g. | \$_ | 0.00 | \$ | N/A | <u> </u> |
| | 8h. | Other monthly income. Specify: | 8h | + \$_ | 0.00 | + \$ | N/A | <u>\</u> |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$ | N/A | A |
| 10. | | culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ | | 3,097.00 + \$ | | N/A = \$ | 3,097.00 |
| 11. | Inclu othe Do r | te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your per friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not scify: | deper | | • | • | chedule J. 11. +\$ | 0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certailies | | | | | 12. \$ | 3,097.00 |
| 13. | Do : | you expect an increase or decrease within the year after you file this form No. | ? | | | | | ly income |
| | | Yes. Explain: | | | | | | |

Official Form 106l Schedule I: Your Income page 2

| Fill ir | n this informa | ation to identify yo | ur case: | | | | | |
|-----------------|----------------------------|--|----------------|--|-----------------------|------------------|-------------------|-------------------------------|
| Debto | or 1 | Nylas Foster | , III | | | Chec | k if this is: | |
| Debto | | | | | | | | wing postpetition chapter |
| | use, if filing) | . 0 . (| NODTU | | 2014 | | 13 expenses as of | the following date: |
| Unite | d States Bank | ruptcy Court for the: | | ERN DISTRICT OF GEOF TA DIVISION | KGIA - | | אואו / טט / איז א | |
| Case (If kno | number own) | | | | | | | |
| Off | ficial Fo | orm 106J | | | | I | | |
| | | J: Your I | | | <u> </u> | | | 12/15 |
| infor | rmation. If m | | eded, atta | If two married people and the another sheet to this to the sheet to th | | | | |
| Part 1. | 1: Desci | ribe Your House nt case? | hold | | | | | |
| | ■ No. Go to | o line 2. es Debtor 2 live i | n a separa | ate household? | | | | |
| | □ N □ Y | | t file Officia | al Form 106J-2, <i>Expen</i> ses | for Separate House | ehold of Debt | for 2. | |
| 2. | Do you hav | e dependents? | ■ No | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relati | | Dependent's age | Does dependent live with you? |
| | Do not state | | | | | | | □ No |
| | dependents | names. | | | | | | □ Yes □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No □ Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | expenses o | penses include of people other the d your depender | nan 🗖 | No Yes | | | | |
| expe | mate your ex | | ur bankru | y Expenses uptcy filing date unless y y is filed. If this is a supp | | | | |
| the v | | h assistance and | | government assistance it luded it on <i>Schedule I:</i> Y | | | Your exp | enses |
| 4. | | or home ownersl nd any rent for the | | ses for your residence. In | nclude first mortgage | e 4. \$ | | 783.00 |
| | If not include | ded in line 4: | | | | | | |
| | 4a. Real | estate taxes | | | | 4a. \$ | | 0.00 |
| | | rty, homeowner's | | | | 4b. \$ | | 0.00 |
| | | maintenance, re owner's associati | | | | 4c. \$ 4d. \$ | | 0.00 |
| 5. | | | | ur residence, such as ho | me equity loans | 5. \$ | | 0.00 |

| Debt | or 1 | Nylas Foster, III | Case num | nber (if known) | |
|------|--------------|--|----------|--------------------|----------------------------|
| 6. | Utilit | ies: | | | |
| | 6a. | Electricity, heat, natural gas | 6a. | \$ | 0.00 |
| | 6b. | Water, sewer, garbage collection | 6b. | \$ | 0.00 |
| | 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 0.00 |
| | 6d. | Other. Specify: Cable/Internet | 6d. | · - | 100.00 |
| | | I and housekeeping supplies | <u> </u> | · | 400.00 |
| | | Icare and children's education costs | 8. | · | 0.00 |
| | | ning, laundry, and dry cleaning | 9. | · - | 76.00 |
| | | onal care products and services | 10. | · | 80.00 |
| | | cal and dental expenses | 11. | · : ———— | 50.00 |
| | | sportation. Include gas, maintenance, bus or train fare. | | | |
| | | ot include car payments. | 12. | \$ | 320.00 |
| 13. | | rtainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 0.00 |
| 14. | Char | itable contributions and religious donations | 14. | \$ | 0.00 |
| 15. | Insur | rance. | | | |
| | Do no | ot include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | 15a. | Life insurance | 15a. | \$ | 0.00 |
| | 15b. | Health insurance | 15b. | \$ | 0.00 |
| | 15c. | Vehicle insurance | 15c. | \$ | 290.00 |
| | 15d. | Other insurance. Specify: | 15d. | \$ | 0.00 |
| 16. | Taxe | s. Do not include taxes deducted from your pay or included in lines 4 or 20. | | | |
| | Spec | ify: | 16. | \$ | 0.00 |
| | | Ilment or lease payments: | | | |
| | | Car payments for Vehicle 1 | 17a. | · | 0.00 |
| | | Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| | 17c. | Other. Specify: Anticipated car payment | 17c. | \$ | 500.00 |
| | 17d. | Other. Specify: Student Loans | 17d. | \$ | 98.00 |
| | | payments of alimony, maintenance, and support that you did not report as | | • | 400.00 |
| | | cted from your pay on line 5, Schedule I, Your Income (Official Form 106l). | 18. | | |
| | | r payments you make to support others who do not live with you. | | \$ | 0.00 |
| | Spec | | 19. | | |
| | | r real property expenses not included in lines 4 or 5 of this form or on Sche | | | 0.00 |
| | | Mortgages on other property | 20a. | · - | 0.00 |
| | | Real estate taxes | 20b. | · | 0.00 |
| | | Property, homeowner's, or renter's insurance | 20c. | · | 0.00 |
| | | Maintenance, repair, and upkeep expenses | 20d. | * | 0.00 |
| | | Homeowner's association or condominium dues | 20e. | · | 0.00 |
| 21. | Othe | r: Specify: | 21. | +\$ | 0.00 |
| 22. | Calc | ulate your monthly expenses | | | |
| | | Add lines 4 through 21. | | \$ | 3,097.00 |
| | | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | 3,001.100 |
| | | Add line 22a and 22b. The result is your monthly expenses. | | \$ | 3,097.00 |
| | 220. / | Add line 22a and 22b. The result is your monthly expenses. | | Φ | 3,097.00 |
| 23. | Calc | ulate your monthly net income. | | | |
| | 23a. | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 3,097.00 |
| | 23b. | Copy your monthly expenses from line 22c above. | 23b. | -\$ | 3,097.00 |
| | | | | | |
| | 23c. | Subtract your monthly expenses from your monthly income. | | | 0.00 |
| | | The result is your monthly net income. | 23c. | \$ | 0.00 |
| | _ | | | | |
| | | ou expect an increase or decrease in your expenses within the year after yo | | | o or doorooo be |
| | | cample, do you expect to finish paying for your car loan within the year or do you expect your ication to the terms of your mortgage? | mortgage | payment to increas | e or decrease because of a |
| | _ | | | | |
| | ■ No | | | | |
| | \square Ye | as lexuallinete. | | | |

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| Fill in this infor | mation to identify your | case: | | |
|---|--|---|---|--|
| Debtor 1 | Nylas Foster, III | | | |
| Daktan 0 | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | — |
| United States Ba | ankruptcy Court for the: | NORTHERN DIST | FRICT OF GEORGIA - ATLANTA DIVISION | |
| | , , | | | _ |
| Case number _ (if known) | | | | ☐ Check if this is an amended filing |
| Official Fo | | n for Indiv | riduals Filing Under Ch | apter 7 12/15 |
| | ividual filing under chap | - | l out this form if: | |
| you have leas You must file thi whiche on the | ever is earlier, unless the form | nd the lease has n ithin 30 days after e court extends th | you file your bankruptcy petition or by the e time for cause. You must also send copie | s to the creditors and lessors you list |
| | eople are filing together nd date the form. | in a joint case, bo | th are equally responsible for supplying co | rrect information. Both debtors must |
| write y | and accurate as possible our name and case nun | nber (if known). | s needed, attach a separate sheet to this for | m. On the top of any additional pages, |
| | ors that you listed in Pa | | : Creditors Who Have Claims Secured by P | roperty (Official Form 106D), fill in the |
| | editor and the property th | nat is collateral | What do you intend to do with the prope secures a debt? | rty that Did you claim the property as exempt on Schedule C? |
| | | | | |
| | Exeter Finance LLC | | Surrender the property. | □ No |
| name: | | | Retain the property and redeem it. | ■ Yes |
| Description of | 2011 Audi Q5 8700 | 0 miles | ☐ Retain the property and enter into a Reaffirmation Agreement. | _ 163 |
| property securing debt | : | | ☐ Retain the property and [explain]: | |
| Creditor's T | urn and Burn Motors | 1 | ■ Surrender the property. | □No |
| name: | | | ■ Surrender the property. ☐ Retain the property and redeem it. | 110 |
| | | | Retain the property and redeem it. | ■ Yes |
| Description of property securing debt: | | 22000 miles | Reaffirmation Agreement. □ Retain the property and [explain]: | |
| Creditor's V | ehicle Solutions Fina | ance | ■ Surrender the property. | □ No |
| name: | | | ☐ Retain the property and redeem it. | ■ Yes |
| Description of | 2011 Volkswagen I | Passat | Retain the property and enter into a Reaffirmation Agreement. | ■ Yes |
| property | | | ☐ Retain the property and [explain]: | |

| Securing debt: Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not y You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be assured be assured by the property: Lessor's name: Description of leased Property: Description of leased Property: Property: Description of leased Property: Description of leased Property: Description of leased Property: Description of leased Property: Description of leased | |
|--|-------------|
| For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not y You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be assur Lessor's name: Description of leased Property: Lessor's name: Description of leased Property: Description of leased | |
| in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not y You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be assur Lessor's name: Description of leased Property: Lessor's name: Description of leased | 106G), fill |
| Lessor's name: Description of leased Property: Lessor's name: Description of leased No | et ended. |
| Description of leased Property: Lessor's name: Description of leased | med? |
| Property: Lessor's name: Description of leased | |
| Description of leased | |
| _ '. | |
| . , | |
| Lessor's name: | |
| Description of leased Property: Yes | |
| Lessor's name: | |
| Description of leased Property: | |
| Lessor's name: | |
| Description of leased Property: | |
| Lessor's name: | |
| Description of leased Property: ☐ Yes | |
| Lessor's name: | |
| Description of leased Property: | |
| Part 3: Sign Below | |
| Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any perperty that is subject to an unexpired lease. | ersonal |
| · · · · · · · · · · · · · · · · · · · | |
| X /s/ Nylas Foster, III X Signature of Debtor 2 Signature of Debtor 1 | |
| Date February 28, 2023 Date | |

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| | | Dodding | The Todge 12 of C | • | |
|---------------------|--------------------------|-------------------|----------------------|----------|-----------------------|
| Fill in this infor | mation to identify your | case: | | | |
| Debtor 1 | Nylas Foster, III | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF GEORGIA - ATLANTA | DIVISION | |
| Case number _ | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| | | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| _ | | | |
|-----|---|-------------|---------------------------|
| Par | t 1: Summarize Your Assets | | assets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 21,639.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 21,639.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | liabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 58,116.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 3,000.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 300,292.00 |
| | Your total liabilities | \$ | 361,408.00 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 3,097.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 3,097.00 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other so | chedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | a persona | I, family, or |

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

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Debtor 1 Nylas Foster, III Case number (if known)

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,622.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total | claim |
|--|-------|------------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 3,000.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 245,712.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 248,712.00 |

| Fill in this i | nformation to identify your | case: | | | |
|--------------------|-------------------------------|----------------------------|------------------------------------|--|-----------------|
| Debtor 1 | Nylas Foster, III | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing | g) First Name | Middle Name | Last Name | | |
| United State | es Bankruptcy Court for the: | NORTHERN DISTRICT | OF GEORGIA - ATLANTA DIVISIO | ON | |
| Case number | er | | | | |
| (if known) | | | | ☐ Check if | this is an |
| | | | | amende | d filing |
| | | | | | |
| | | | | | |
| Official F | Form 106Dec | | | | |
| Declar | ration About a | n Individual | Debtor's Schedu | ıles | 12/15 |
| | | | | | |
| f two marrie | ed people are filing together | r. both are equally respor | nsible for supplying correct infor | mation. | |
| | | | • | | |
| | | | or amended schedules. Making | | |
| | th. 18 U.S.C. §§ 152, 1341, 1 | | ruptcy case can result in fines u | p to \$250,000, or imprisonmen | it for up to 20 |
| , , | | , | | | |
| | Ī | | | | |
| | Sign Below | | | | |
| | | | | | |
| Did yo | ou pay or agree to pay some | one who is NOT an attori | ney to help you fill out bankrupto | y forms? | |
| ■ N | 0 | | | | |
| - | and Marian of Marian | | | Alle als Devilored to Dell'Gen Des | |
| <u> </u> | es. Name of person | | | Attach Bankruptcy Petition Prep Declaration, and Signature (Off | |
| | | | | Deciaration, and dignature (en | iolari omi 110) |
| | | | | | |
| | | that I have read the sum | mary and schedules filed with th | s declaration and | |
| that the | ey are true and correct. | | | | |
| X /s/ | Nylas Foster, III | | X | | |
| | las Foster, III | | Signature of Debtor 2 | | |
| Sig | nature of Debtor 1 | | | | |

Date February 28, 2023

Date

| Fill in this information to identify your case: | | | | lirected in this form and | d in Form |
|---|---|-----------------------------------|-------------------------------------|---|-----------------------------------|
| Debtor 1 Nylas Foster, III | | 122A-1St | nbb: | | |
| Debtor 2 (Spouse, if filling) | | ■ 1. T | here is no pres | umption of abuse | |
| United States Bankruptcy Court for the: NORTHERN D GEORGIA - AT | ISTRICT OF LANTA DIVISION | á | applies will be n | o determine if a presunade under <i>Chapter 7</i> icial Form 122A-2). | • |
| Case number | | | | does not apply now by service but it could a | |
| | | ☐ Ch | eck if this is a | n amended filing | |
| Official Form 122A - 1 | | | | | |
| Chapter 7 Statement of Your C | urrent Monthly | Incom | е | | 12/1 |
| Be as complete and accurate as possible. If two married peop attach a separate sheet to this form. Include the line number to asse number (if known). If you believe that you are exempted qualifying military service, complete and file Statement of Exempted Calculate Your Current Monthly Income 1. What is your marital and filing status? Check one | o which the additional inform from a presumption of abuse emption from Presumption of | ation applies because you | . On the top of a do not have pring | ny additional pages, wri marily consumer debts o | te your name and or because of |
| ■ Not married. Fill out Column A. lines 2-11. | , | | | | |
| ☐ Married and your spouse is filing with you. Fil | I out both Columns A and B | , lines 2-11. | | | |
| ☐ Married and your spouse is NOT filing with yo | | | | | |
| \square Living in the same household and are not le | egally separated. Fill out bo | oth Columns | A and B, lines | 2-11. | |
| ☐ Living separately or are legally separated. F penalty of perjury that you and your spouse ar living apart for reasons that do not include eva | re legally separated under n | onbankruptc | y law that appli | es or that you and you | |
| Fill in the average monthly income that you received from 101(10A). For example, if you are filing on September 15, the the 6 months, add the income for all 6 months and divide the transpouses own the same rental property, put the income from the | 6-month period would be March otal by 6. Fill in the result. Do no | 1 through Aug ot include any i | gust 31. If the amount m | ount of your monthly incor ore than once. For examp | me varied during ple, if both |
| | | Colur. Debto | | Column B Debtor 2 or non-filing spouse | |
| Your gross wages, salary, tips, bonuses, overtime payroll deductions). | ne, and commissions (befo | ore all \$ | 3,622.00 | \$ | |
| Alimony and maintenance payments. Do not inclu Column B is filled in. | de payments from a spouse | e if \$ | 0.00 | \$ | |
| All amounts from any source which are regularly of you or your dependents, including child suppy from an unmarried partner, members of your housely and roommates. Include regular contributions from a | ort. Include regular contribu nold, your dependents, pare a spouse only if Column B is | tions nts, | 0.00 | \$ | |
| filled in. Do not include payments you listed on line 3 5. Net income from operating a business, profession | | Ψ | | | |
| , , | Debtor 1 | | | | |
| Gross receipts (before all deductions) | \$0.00 | | | | |
| Ordinary and necessary operating expenses | -\$ 0.00 | • | 2.00 | • | |
| Net monthly income from a business, profession, or | farm \$0.00 Copy h | ere -> \$ | 0.00 | \$ | |
| 6. Net income from rental and other real property | Debtor 1 | | | | |
| Gross receipts (before all deductions) | \$ 0.00 | | | | |
| Ordinary and necessary operating expenses | -\$ 0.00 | | | | |
| Net monthly income from rental or other real propert | 0.00 | ere -> \$ | 0.00 | \$ | |
| 7. Interest, dividends, and royalties | · <u> </u> | \$ | 0.00 | \$ | |
| | | | | | |

Debtor 1 Nylas Foster, III Case number (if known)

| | | | | Column A Debtor 1 | | Column B Debtor 2 o non-filing | | |
|------|---|---|---|-------------------|--------------|--------------------------------|------------|-----------|
| 8. | Unemployment compensation | | | \$ | 0.00 | \$ | - | |
| | Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here: | received was a benefi | t under | | | | | |
| | For you \$ | 0.0 | 00 | | | | | |
| | For your spouse \$ | | | | | | | |
| 9. | Pension or retirement income. Do not include any ambenefit under the Social Security Act. Also, except as stanot include any compensation, pension, pay, annuity, or United States Government in connection with a disability disability, or death of a member of the uniformed service pay paid under chapter 61 of title 10, then include that p does not exceed the amount of retired pay to which you if retired under any provision of title 10 other than chapter | ated in the next senter r allowance paid by the y, combat-related injur es. If you received any pay only to the extent the would otherwise be en | nce, do e y or retired nat it | \$ | 0.00 | \$ | | |
| 10. | Income from all other sources not listed above. Spe | | nount. | | | | | |
| | Do not include any benefits received under the Social Screeived as a victim of a war crime, a crime against hum domestic terrorism; or compensation pension, pay, ann United States Government in connection with a disability disability, or death of a member of the uniformed service sources on a separate page and put the total below | nanity, or international nuity, or allowance paid y, combat-related injur | I by the y or | | | | | |
| | · | | | \$ | 0.00 | \$ | | |
| | Total amounts from a survey warm if any | | | \$ | 0.00 | \$ | | |
| | Total amounts from separate pages, if any. | | | » | 0.00 | \$ | <u> </u> | |
| 11. | Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total | | \$ | 3,622.00 | + \$ | | Total c | 3,622.00 |
| Part | 2: Determine Whether the Means Test Applies to | o You | | | | | | |
| 12. | Calculate your current monthly income for the year. | Follow these steps: | | | | | | |
| | 12a. Copy your total current monthly income from line 1 | 1 | | Сор | y line 11 h | nere=> | \$ | 3,622.00 |
| | Multiply by 12 (the number of months in a year) | | | | | | x 1 | |
| | 12b. The result is your annual income for this part of the | e form | | | | 12b | · \$ | 13,464.00 |
| 13. | Calculate the median family income that applies to y | you. Follow these step | s: | | | | | |
| | Fill in the state in which you live. | GA | | | | | | |
| | Fill in the number of people in your household. | 1 | | | | | | |
| | Fill in the median family income for your state and size of | of household. | | | | 13. | \$ | 56,008.00 |
| | To find a list of applicable median income amounts, go of for this form. This list may also be available at the bankr | | ecified i | in the separa | ate instruct | tions | | |
| 14. | How do the lines compare? | | | | | | | |
| | 14a. Line 12b is less than or equal to line 13. Or Go to Part 3. Do NOT fill out or file Official I | | eck box | 1, There is i | no presum | ption of abus | e. | |
| | | | The pre | esumption of | abuse is o | determined b | y Form 12 | 22A-2. |
| | 14b. ☐ Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2. | , , | • | | | | | |
| Part | Go to Part 3 and fill out Form 122A–2. | , | • | | | | | |
| Part | Go to Part 3 and fill out Form 122A–2. | | | atement and | in any atta | achments is tr | ue and co | orrect. |
| Part | Go to Part 3 and fill out Form 122A–2. Sign Below | | | atement and | in any atta | achments is tr | rue and co | orrect. |

| Debtor 1 | Nylas Foster, III | Case number (if known) | |
|----------|---|------------------------|--|
| Da | ate February 28, 2023 | | |
| | MM / DD / YYYY | | |
| | If you checked line 14a, do NOT fill out or file Form 122A-2. | | |
| | If you checked line 14b, fill out Form 122A-2 and file it with this form. | | |

United States Bankruptcy Court NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVISION

| | | EXILERATE OF GEORGIA - ATE | | |
|------|----------------------------------|---|---------------------|-----------------------|
| re | Nylas Foster, III | Debtor(s) | Case No. Chapter | 7 |
| | VER | RIFICATION OF CREDITOR | MATRIX | |
| | | | | |
| e ab | ove-named Debtor hereby verifies | s that the attached list of creditors is true and | correct to the best | of his/her knowledge. |
| . 4 | Fahruary 20, 2022 | /o/ Nivigo Footor III | | |
| ate: | February 28, 2023 | /s/ Nylas Foster, III Nylas Foster, III | | |
| | | , | | |

Acima Credit 9815 South Monroe Street 4th Floor Sandy, UT 84070

American Financial Attn: Bankruptcy 6400 Winchester Road Memphis, TN 38115

American First Finance Attn: Bankruptcy Po Box 565848 Dallas, TX 75356

Capio Partners, LLC Attn: Bankruptcy Po Box 3498 Sherman, TX 75091

Carter-Young Attention: Bankruptcy 120 2nd St, 2nd Floor Monroe, GA 30655

Exeter Finance LLC Attn: Bankruptcy Po Box 166008 Irving, TX 75016

First Premier Bank Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117

Georgia Department of Revenue Compliance Division ARCS Bankruptcy 1800 Century BLVD NE Suite 9100 Atlanta, GA 30345-3202

Gwinnett county Child Support 95 Constitution Blvd SW #200 Lawrenceville, GA 30046

IRS
401 W. Peachtree St., NW
Stop #334-D
Room 400
Atlanta, GA 30308

Jefferson Capital Systems, LLC Attn: Bankruptcy 16 Mcleland Road Saint Cloud, MN 56303

Jovan Hills 931 Greenleaf Road Conyers, GA 30013

Lanae Powell 931 Greenleaf Road Conyers, GA 30013

Leaseville 1100 Glendon Ave Los Angeles, CA 90024

Nicole Foster Unknown

Santander Consumer USA Attn: Bankruptcy Po Box 961245 Fort Worth, TX 76161

True Accord 16011 College Blvd Suite 130 Lenexa, KS 66219

Turn and Burn Motors 1794 Iris Dr SW Conyers, GA 30094

United Auto Acceptance Attn: Bankruptcy Dept. P.O. Box 926 Morrow, GA 30260 USDOE/GLELSI 2401 International Lane Madison, WI 53704

Vehicle Solutions Finance 104 Crandon Blvd Key Biscayne, FL 33149

Westlake Portfolio Management, LLC Attn: Bankruptcy Po Box 76809 Los Angeles, CA 90054

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation | |
|------------|--------------------|--|
| \$245 | filing fee | |
| \$78 | administrative fee | |
| + \$15 | trustee surcharge | |
| \$338 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$78 | administrative fee |
| | \$278 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$78 | administrative fee |
| | \$313 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.